

MUSCOGEE (CREEK) NATION

SPECIAL ACADEMIC/EXTRA-CURRICULAR ACADEMIC ACTIVITIES NCA 00-136 GRANT

INFORMATION SHEET

PLEASE READ CAREFULLY: Applicants MUST complete this application and submit all requested documentation. Incomplete applications will NOT be considered.

NCA 00-136 is designed to address the needs Muscogee (Creek) students who have exhausted all other funding sources to meet their need and WHO ARE NOT RECEIVING ANY TYPE OF FINANCIAL ASSISTANCE FROM ANY OTHER TRIBAL EDUCATION PROGRAM FOR THIS SPECIFIC NEED.

GRANT INFORMATION:

1. The NCA 00-136 Grant will assist eligible students with approved needs **ONE TIME**, that may range up to a maximum of \$500 based on financial need. Special Academic & school related Extra-Curricular activities.
2. This grant is **SUPPLEMENTAL** financial assistance and should not be seen as the total funding source for any specific need.
3. **We do not do reimbursements.**
4. The Recipient will be required to sign a statement that all receipts will be submitted to the reviewing committee within two (2) weeks of the grant being utilized. Funds must be used for the purpose approved by the reviewing committee.
5. The Grant Award is **non-transferrable** and must be utilized by the applicant for approved need only.
6. If funds are not used in the manner approved by the reviewing committee those funds are subject to be repaid by the recipient.
7. The Reviewing Committee has full discretionary authority in the administration of these funds.
8. If selected as a grant recipient, you will be notified by mail or/ phone from the Grant staff.

GRANT REQUIREMENTS: REQUIRED

1. Complete application (attached)
2. Copy of applicants MUSCOGEE (CREEK) NATION CITIZENSHIP card
3. Letter of acceptance or appointment from the academic organization (Special Academic), school sponsored educational or school sponsored athletic organization (Extra-Curricular)
4. A short (printed or typed) statement explaining your need
5. A budget breakdown:
 - a. Expenses being incurred by the student (e.g., tuition, textbooks, on-campus housing costs)
 - b. The amount of funds being requested
 - c. Listing of funds raised by the student to assist in this endeavor (money you made from job, or donated to you)
6. Letter(s) of denial from alternative funding source(s) (letter from financial aid, bank, etc.)

Mail Application to: **Muscogee (Creek) Nation
Department of Education & Training
ATTN: NCA 00-136 Grant
P.O. Box 580
Okmulgee, OK 74447**

For Additional Information Contact the Department of Education & Training at: 918.732.7727 or 918.732.7747
Fax to: 918.732.7728. Apfields@mcn-nsn.gov

NCA 00-136 GRANT APPLICATION

(MUST BE COMPLETED IN FULL TO BE CONSIDERED)

DATE _____

NAME _____ SOCIAL SECURITY # _____ - _____ - _____

D.O.B. ____/____/____ SCHOOL _____ GRADE _____

HOME ADDRESS _____

STREET CITY STATE ZIP

HOME/CELL PHONE (____) _____ WORK PHONE (____) _____

EMAIL: _____

Contact Person's Name Representing School or Organization:

NAME _____ PHONE (____) _____

Amount of Funds Being Requested: \$ _____ Dates of Activities for the Funds: _____ DEADLINE IF ANY, for activity payment: _____

IF YOUR GRANT IS APPROVED THE CHECK WILL BE MADE PAYABLE AND MAILED TO:

SCHOOL/ORGANIZATION/COMPANY: _____

ATTN: _____

ADDRESS: _____

CITY STATE ZIP

Please fill out and sign below. Eligible applicants under the age of 18 must have a parents/guardian's consent and signature. I/We, _____, have read and understand the eligibility requirements of this grant from the Muscogee Creek Nation, NCA 00-136. I certify that all information provided is current and complete, including attachments. I/We affirm that the proceeds of this grant, as authorized under the Department of Education and Training and in ordinance per the Muscogee (Creek) Nation Legislation 2000 NCA 00-136, will be used solely for the purpose approved by the reviewing committee or will be subjected to repayment. I guarantee that I will deliver all receipts to the reviewing committee within two (2) weeks of the grant being utilized.

Student or Parent/Guardian Signature

Date

Check List:

Completed Application _____
Copy of Citizenship Card _____
Acceptance Letter _____

Completed Statement of Need _____
Budget Breakdown _____
Letter(s) of Denial _____

NCA 00-136 GRANT REVIEWING COMMITTEE USE ONLY

APPLICATION RECEIVED DATE: _____ BY: _____

Date of Review: _____

Review Team Members: CJ _____; JOM _____; EB _____; WJ _____;

Approved for assistance: YES _____ NO _____

Amount to be awarded: \$ _____

*Reason for Denial: _____

